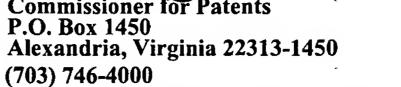
## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together v

applicable fee(s), to: Mail

Mail Stop ISSU EE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450



or <u>Fax</u>

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as

AACA		ny change of address)	Note: A certificate Fee(s) Transmittal. papers. Each addition	of mailing can only be used for This certificate cannot be used to onal paper, such as an assignment	or domestic mailings of the for any other accompanying ent or formal drawing, must
	590 12/06/2004		have its own certific	cate of mailing or transmission.	
BIRCH STEWAL PO BOX 747 FALLS CHURCH, 08/2005 MBEYENE2 0000		70176	I hereby certify that States Postal Service addressed to the M transmitted to the U.S.	Certificate of Mailing or Transmission by certify that this Fee(s) Transmittal is being deposited with the United Postal Service with sufficient postage for first class mail in an envelope sed to the Mail Stop ISSUE FEE address above, or being facsimile nitted to the USPTO (703) 746-4000, on the date indicated below.	
FC:1501	1400.00 OP	MAR 0 4 20	05 பூ	180.44.4.4.	(Depositor's name)
FC:1504	300.00 OP	3 4 <sup>6</sup> 2 - 1	74		(Signature)
FC:8001	12.00 OP	MAR 0 4 20	ARM. L		(Date)
APPLICATION NO.	FILING DATE	FIRST NAME	ED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/020,922	12/19/2001	Naoto	Yasaka	1155-0236P	8872
TITLE OF INVENTION: SI	EALANT FOR POLYPROPY	LENE AND EASILY OPEN	ABLE HERMETICALLY SE	ALED PACKAGE INCLUDIN	IG THE SAME
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1370	\$300	\$1670 1700	03/07/2005
EXAM	IINER	ART UNIT	CLASS-SUBCLASS	7 // 5	
AUGHENBAUGH, WALTER		1772	525-191000	<b></b>	
	RESIDENCE DATA TO BE an assignee is identified belo	ow, no assignee data will ap	•	gnee is identified below, the d	ocument has been filed for
PLEASE NOTE: Unless recordation as set forth in	37 CFR 3.11. Completion of	tins form is 1001 a substitute			
PLEASE NOTE: Unless recordation as set forth in  (A) NAME OF ASSIGNI	•		CE: (CITY and STATE OR C	OUNTRY)	
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